



# UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 5454

|                             |  |              |                        |  |
|-----------------------------|--|--------------|------------------------|--|
| SERIAL NUMBER<br>09/502,627 | FILING OR 371(c)<br>DATE<br>02/11/2000<br>RULE | CLASS<br>345 | GROUP ART UNIT<br>2174 | ATTORNEY<br>DOCKET NO.<br>42933/329508 |
|-----------------------------|--|--------------|------------------------|--|

## APPLICANTS

Martin Tobias, Seattle, WA;  
Beverley Kite, Seattle, WA;  
Mathews Brown, Seattle, WA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/120,207 02/11/1999 and claims benefit of 60/120,206 02/11/1999  
and claims benefit of 60/120,208 02/11/1999  
and claims benefit of 60/120,209 02/11/1999  
and claims benefit of 60/119,762 02/11/1999

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/12/2000

|                                 |   |                  |                |              |                    |
|---------------------------------|---|------------------|----------------|--------------|--------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | WA               | 6              | 18           | 2                  |
| Verified and Acknowledged       | Examiner's Signature _____ Initials _____   |                  |                |              |                    |

## ADDRESS

826

## TITLE

SYSTEM FOR AUTOMATED COMPREHENSIVE REMOTE SERVICING FOR MEDIA INFORMATION

|                            |   |   |
|----------------------------|---|---|
| FILING FEE RECEIVED<br>410 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|----------------------------|---|---|